

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

101760479

2157

## CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |                           |                          |
|----------------------------------|---------------------------|--------------------------|
| TOTAL CLAIMS                     |                           |                          |
| FOR <i>DCE</i>                   | NUMBER FILED              | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          | <i>35</i> minus <i>20</i> | <i>0</i>                 |
| INDEPENDENT CLAIMS               | <i>4</i> minus <i>3</i>   | <i>0</i>                 |
| MULTIPLE DEPENDENT CLAIM PRESENT |                           | <input type="checkbox"/> |

*01659003639*  
The difference in column 1 is less than zero, enter "0" in column 2.

## CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|------------------------------------------------|-------------------------------------------|-------|---------------------------------------------|------------------|
|                                                | Total                                     | Minus | **                                          | =                |
| Independent                                    | Minus                                     | ***   | =                                           |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |       | <input type="checkbox"/>                    |                  |

SMALL ENTITY  
TYPE OTHER THAN  
OR SMALL ENTITY

|           |        |              |        |
|-----------|--------|--------------|--------|
| RATE      | FEES   | RATE         | FEES   |
| BASIC FEE | 385.00 | OR BASIC FEE | 770.00 |
| XS 9=     |        | OR XS18=     |        |
| X43=      |        | OR X86=      |        |
| +145=     |        | OR +290=     |        |
| TOTAL     |        | OR TOTAL     | 790.00 |

OTHER THAN  
SMALL ENTITY OR SMALL ENTITY

|                  |                        |                  |                        |
|------------------|------------------------|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE             | ADDI-<br>TIONAL<br>FEE |
| <i>25</i>        |                        | <i>30</i>        |                        |
| XS 9=            |                        | XS18=            |                        |
| <i>13</i>        |                        | <i>20</i>        |                        |
| X43=             |                        | X86=             |                        |
| +145=            |                        | +290=            |                        |
| TOTAL ADDIT. FEE |                        | TOTAL ADDIT. FEE |                        |

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|------------------------------------------------|-------------------------------------------|-------|---------------------------------------------|------------------|
|                                                | Total                                     | Minus | **                                          | =                |
| Independent                                    | Minus                                     | ***   | =                                           |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |       | <input type="checkbox"/>                    |                  |

|                  |                        |                  |                        |
|------------------|------------------------|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE             | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | X\$18=           |                        |
| X43=             |                        | X86=             |                        |
| +145=            |                        | +290=            |                        |
| TOTAL ADDIT. FEE |                        | TOTAL ADDIT. FEE |                        |

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |       | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|------------------------------------------------|-------------------------------------------|-------|---------------------------------------------|------------------|
|                                                | Total                                     | Minus | **                                          | =                |
| Independent                                    | Minus                                     | ***   | =                                           |                  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |       | <input type="checkbox"/>                    |                  |

|                  |                        |                  |                        |
|------------------|------------------------|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE | RATE             | ADDI-<br>TIONAL<br>FEE |
| X\$ 9=           |                        | X\$18=           |                        |
| X43=             |                        | X86=             |                        |
| +145=            |                        | +290=            |                        |
| TOTAL ADDIT. FEE |                        | TOTAL ADDIT. FEE |                        |

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.